Office of the Governor | Mississippi Division of Medicaid

Financial Impact of the ACA on Mississippi Division of Medicaid

March 11, 2013



Affordable Care Act Provisions

- The Affordable Care Act has both mandatory and optional provisions
- Mandatory provisions require states to change the way Medicaid programs operate
- Involves expansion of certain eligibility categories
- Enhances payments to certain provider groups



Affordable Care Act Optional Provision

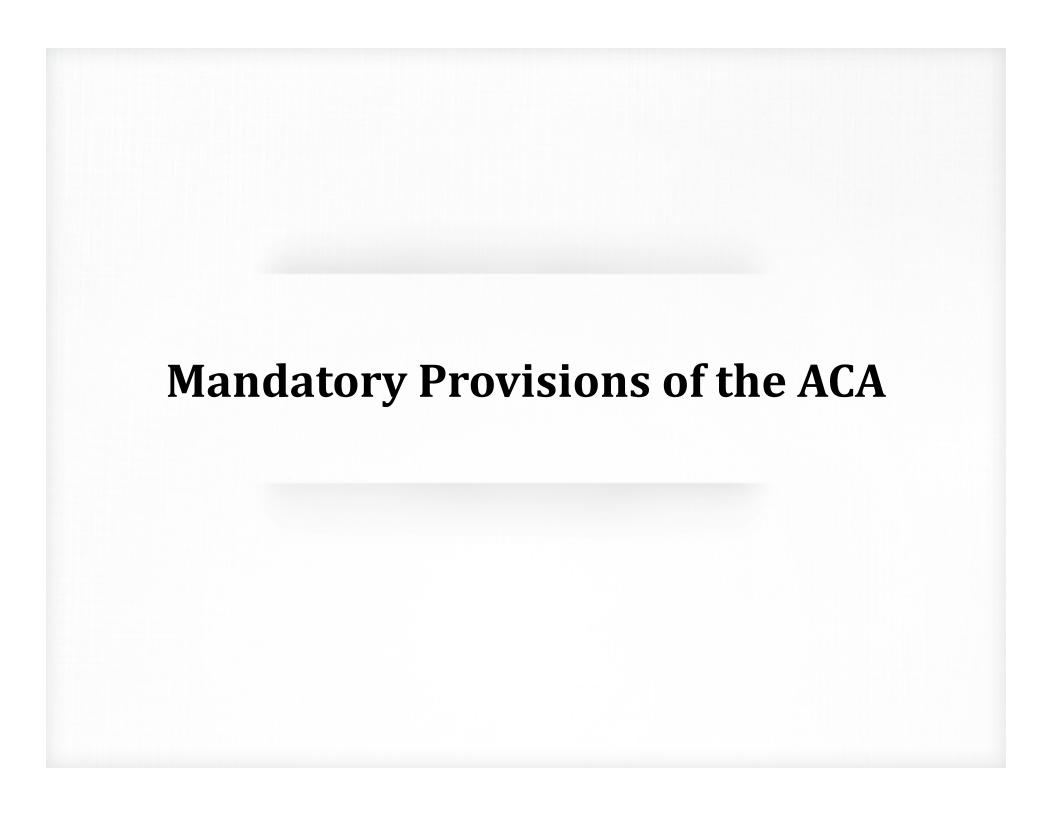
According to CMS, the only optional provision is expansion of non-pregnant, non-elderly adult beneficiary eligibility to 138% of the Federal Poverty Level.

2013 Federal Poverty Level Guidelines

(at 138% FPL)

Persons in Family/Household	Income Level in Dollars
1	\$15,856
2	\$21,404
3	\$26,951
4	\$32,499





Mandatory ACA Spending Overview

- Foster Children Expansion to Age 26
- Expanded Eligibility for Children Includes Enhanced FMAP
- Eligibility Modernization/Administrative Expenditures
- Primary Care Physician Fee Increase

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- Health Insurer Fee
- Woodwork Effect Population



Foster Children Expansion to Age 26

- Extends coverage from 21-26 years of age
- Estimated cost through 2020 = \$12 million

Expanded Eligibility for Children – Includes Enhanced FMAP

- Includes children 6-18 years of age
- Increases Medicaid eligibility from 100% to 138% of the FPL currently served by CHIP
- Unknown financial impact



Foster Children Expansion to Age 26 (in millions)

Mandatory ACA Spending	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total
State Funds	\$1	\$2	\$2	\$2	\$2	\$2	\$2	\$12
Federal Funds	\$2	\$4	\$5	\$5	\$5	\$6	\$6	\$33
Total	\$3	\$6	\$6	\$7	\$7	\$8	\$8	\$45

Eligibility Modernization

- Modified Adjusted Gross Income (MAGI)
 - Income disregards and household composition changes result in greater number of eligible beneficiaries

Administrative Expenditures

- Upgrade computer infrastructure, hire staff to process the additional beneficiary applications
- Estimated cost through 2020 = \$15-\$23 million



Administrative Expenditures

Mandatory ACA Spending	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total
State Funds	\$1	\$3	\$3	\$3	\$3	\$3	\$4	\$20
Federal Funds	\$1	\$3	\$3	\$3	\$3	\$3	\$4	\$20
Total	\$3	\$5	\$6	\$6	\$6	\$7	\$7	\$39

Primary Care Physician Fee Increase

- Pay Primary Care Physicians 100% of Medicare rate
- 100% covered by federal funds for 2013 and 2014;
 no additional federal funding allocated after 2014
- Will state cover these costs after the first two years (2015-2020)?
- Estimated cost through 2020 = \$74-76 million

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Primary Care Physician Fee Increase* (in millions)

Mandatory ACA Spending	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total
State Funds	\$0	\$6	\$12	\$13	\$14	\$15	\$16	\$75
Federal Funds	\$39	\$37	\$33	\$35	\$37	\$40	\$42	\$264
Total	\$39	\$43	\$46	\$48	\$51	\$54	\$58	\$339

^{*}The ACA does not require the Primary Care Physician fee increase to be continued past 2015; DOM has projected it to continue through 2020.



Health Insurer Fee

- ACA places \$8 billion annual fee on the health insurance industry nationwide
- Net result is a 1.4% increase in managed care fees for MS in 2014 and 2.5% increase for 2015-2020
- Estimated cost through 2020 = \$92 million

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Health Insurer Fee

Mandatory ACA Spending	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total
State Funds	\$3	\$10	\$14	\$15	\$16	\$16	\$17	\$92
Federal Funds	\$9	\$28	\$37	\$40	\$42	\$45	\$47	\$248
Total	\$13	\$38	\$51	\$54	\$58	\$61	\$65	\$340

Woodwork Effect Population

- Increased enrollment for those already eligible for Medicaid is due to:
 - o Pressure from the Individual Mandate
 - o Referrals from the Health Insurance Exchange
 - Loss of employer coverage

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- Starting in 2014, increased enrollment for those already eligible are estimated to be an additional 48,000 to 72,000 individuals (60% to 100% participation)
- The woodwork effect is the largest driver of ACA spending growth without expansion

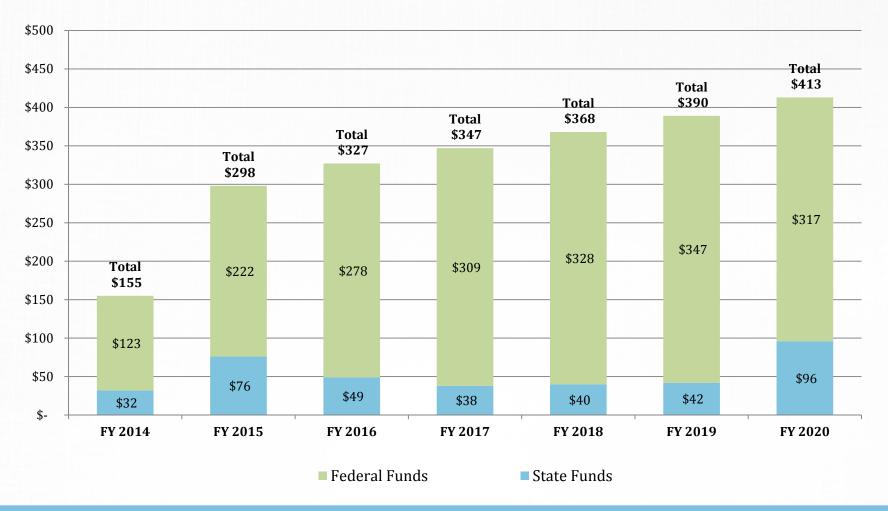
Woodwork Effect Population

Mandatory ACA Spending	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total
State Funds	\$26	\$56	\$59	\$62	\$66	\$70	\$74	\$413
Federal Funds	\$71	\$151	\$160	\$169	\$179	\$190	\$201	\$1,121
Total	\$97	\$206	\$218	\$232	\$245	\$260	\$276	\$1,534

Mandatory ACA Spending Growth Summary

Estimated cost of mandatory changes without expansion for 2014-2020 = \$272-\$436 million

Mandatory ACA Spending Growth Overview



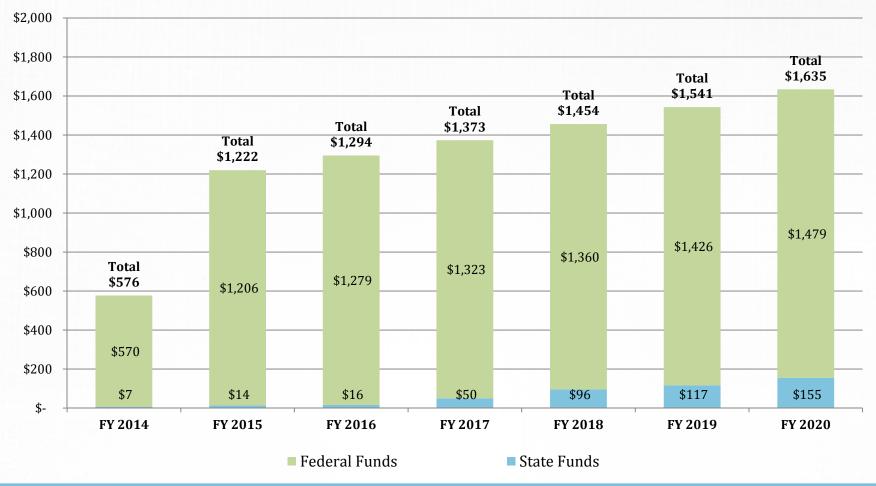
Optional ACA Expansion to 138% Federal Poverty Level

Optional ACA Expansion to 138% Federal Poverty Level*

	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total
State Funds	\$7	\$14	\$16	\$50	\$96	\$117	\$155	\$455
Federal Funds	\$570	\$1,206	\$1,279	\$1,323	\$1,360	\$1,426	\$1,479	\$8,639
Total	\$576	\$1,222	\$1,294	\$1,373	\$1,454	\$1,541	\$1,635	\$9,095

^{*}These figures exclude baseline expenditures and mandatory ACA spending.

Optional ACA Expansion to 138% Federal Poverty Level



Total Estimated Financial Impact of the ACA (in millions)

	FY2014	FY2015	FY2016	FY2017	FY2018	FY2019	FY2020	Grand Total			
Mandatory											
State Funds	\$32	\$76	\$49	\$38	\$40	\$42	\$96	\$372			
Federal Funds	\$123	\$222	\$278	\$309	\$328	\$347	\$317	\$1,925			
Total	\$155	\$298	\$327	\$347	\$368	\$390	\$413	\$2,297			
		O]	ptional I	Expansio	n						
State Funds	\$7	\$14	\$16	\$50	\$96	\$117	\$155	\$455			
Federal Funds	\$570	\$1,206	\$1,279	\$1,323	\$1,360	\$1,426	\$1,479	\$8,639			
Total	\$576	\$1,222	\$1,294	\$1,373	\$1,454	\$1,541	\$1,635	\$9,095			

Total Estimated Financial Impact of ACA

Estimated cost of mandatory changes without
 expansion for 2014-2020 = \$272-\$436 million

Estimated cost of ACA mandates and full adult
 expansion up to 138% FPL = \$609-\$1,032 million

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Baseline Expenditures, Mandatory ACA Cost & Optional ACA Expansion Cost Combined

